	PI	ROCUREMENT REQU	1. DA	1. DATE:							
		PARTI - F	OR INITIA	TING OR	RGANIZATIO	ON					
2. FRO	M (Office, Lab,	Office Symbol, Telephone Number):	3.	PROCUR	EMENT REQ	UEST INV	OLVE:	S HARDWARE	AS C	HECKED:	
				NOT QUALITY SENSITIVE QU					SITIVI	<b>=</b>	
FLIGHT/ASSOCIATED GSE								S&MA Office Rep.			
4 PUR	POSE (Use Co	ontinuation Sheet, MSFC Form 404-1, a	s necessary	)·				S&MA C	MICE R	ер.	
	TITLE:						Τ				
(24 POSITION BASIC NOUN DESCRIPTION)											
CONTINUATION: (24) CONTINUATION:											
5 /Tol	ho used only or	Supplements requesting decrease(s) i	n fundo or Di	rogram Au	thority):						
5. (To be used only on Supplements requesting decrease(s) in funds or Program Authority):  DECREASE IS COORDINATED WITH:									(Name of Buyer/Negotiator)		
DL			* OT !! * O D D					(140,1110-01	Buyo.	riogonator)	
NO PURCHASE ORDER OR CONTRACT HAS BEEN ISSUED TO USE THESE FUNDS.  CHECK ONE: BURCHASE ORDER/CONTRACT MOD#											
CHE	CKONE.	PURCHASE ORDER/CONTRACT THESE CHANGE ORDER OR MODIF	ICATION RE	OUIRED	MOD# _			ОВІ	LIGAT	ED	
						NETICE CVMPOL		TELEBHONE NUMBER			
6. TECHNICAL REPRESENTATIVE				OFFICE SYMBOL				TELEPHONE NUMBER			
					055105.0	(14DQ)					
7.	0	THER SUGGESTED CONTACTS			OFFICE SYMBOL			TELEPHONE NUMBER			
8. PRO	POSED CONT	RACT AWARD DATE:		9. TAF	9. TARGET COMPLETION DATE:			10. ESTIMATED COST:			
11. PROGRAM CODING STRUCTURE				12.				APPROVAL			
DCN		ESTIMATED		TED COST	SIGNAT	Approving Official) DATE					
									-		
13. CO	NTRACT: \bigcup\	WILL WILL NOT INVOLVE ACCESS	S TO CLASS	IFIED INF	ORMATION.						
,		nformation is involved, attach NASA Fo	rm 446, Req	uest for							
Contract	tor Clearance.)										
		PART II - MS	SFC Accou	ınting O <sub>l</sub>	perations O	ffice					
	SOURCES AU <sup>-</sup> JRCES INITIAT	THORITY AVAILABILITY:									
KLSOC	INCLO INITIAT										
		(SIGNED)					])	DATE) (BF20	 D)	_	
FUND (	CERTIFICATIO	N: I certify that funds in the amount of			(p	lus \$100.00	or 10	% not to excee	,	0.00),	
are ava	ilable under ap	propriation	to	cover the	items listed o	n this docu	ment.				
(Deputy Chief Financial Officer for Finance) (DA									1)	_	
		PART III -	FOR PRO	CUREM	ENT OFFIC						
15. ASS	SIGNED TO:				18. RECOR						
									NINITIATOD. CO. DATE		
16. BY:			17. DATE:		19. COPY F	ORWARDE	סד ט-	INITIATOR:	20. D	AIE:	
		DOCUMENT CONTROL NUMBER:	ı		I		SUPF	PLEMENT NUM	MBER:		
Р	ART IV										

## **INSTRUCTIONS**

- BLOCK 1. Enter date the request is prepared.
- BLOCK 2. Enter title of originating office or laboratory, office symbol, and telephone number.
- BLOCK 3. Check appropriate block as to whether hardware is "Quality Sensitive", "Not Quality Sensitive", etc.
- BLOCK 4. Enter the twenty-four or less position basic noun description in the designated blocks to the right of "Title". Enter the purpose for which the request is being prepared, i.e., scope of work to be contracted, incremental funding actions, and change in scope of contract. If only one program coding structure number applies, enter a detailed description of the request; the program code will be entered in Block 11. If more than one program code applies to the request, specifically relate the scope of work or other requested action to each program code. Consecutively number all continuation sheets, beginning with the numeral "2", e.g., page 2 of 3, etc. When the purpose of the procurement request is to request issuance of a sub-allotment to another NASA station, the notation "SUB-ALLOTMENT TO XX", will be shown in all capital letters with the actual name of the NASA station (Sub-Allotee) substituted for the "XX".
- BLOCK 5. Enter the name and telephone number of the buyer or negotiator with whom the decrease has been coordinated. If this is a decrease to a procurement request for which the funds have not been obligated, check the first box. If funds have been obligated, check the second box and indicate the applicable purchase order/contract number and modification number.
- BLOCK 6. Enter the name of the person to be contacted on technical data, his office symbol and telephone number.
- BLOCK 7. Enter the names of other people that can be contacted, their office symbol and telephone number.
- BLOCK 8. Enter the date the contract should be awarded, amended, etc.
- BLOCK 9. Enter the date the requested action should be accomplished.
- BLOCK 10. Enter the best estimate of the total cost to cover the requested action. This is the amount of funding required for this one document alone and in case of a supplement is NOT the summary total of that supplement plus the related basic procurement request adn all previous supplements thereto.
- BLOCK 11. Program Coding Structure:
  - "DCN" Originator leave blank. To be completed by BF20.
  - "Program Code" Originator, enter the program codes applicable to the requested action.
  - "Estimated Cost" Originator, enter the estimated cost applicable to each program code.
- BLOCK 12. Enter signature(s) of approving official(s).
- BLOCK 13. Check appropriate box and, if applicable, prepare NASA Form 446.
- BLOCK 14. Self explanatory.
- BLOCK 15. Enter title of Branch to which this request is assigned.
- BLOCK 16. To be used for approval signature, as applicable, the the Procurement Office.
- BLOCK 17. Enter date approval was given in Block 16.
- BLOCK 18. Enter signature of person "logging in" the request in Procurement Office.
- BLOCK 19. Indicate when a feed-back copy is forwarded to the originator and enter the date.
- PART IV. TO BE COMPLETED BY ORIGINATOR:

Enter the Document Control Number in accordance with Volume 2, Financial Management Handbook. Enter the supplement number as applicable, in the space provided.